



**Risom #6589; #993**



To: Senator Gerrantana, Representative Johnson and Members of the Public Health Committee;

My Name is Laurel Risom and I live in Old Lyme CT. I currently practice as a dental hygienist and teach dental hygiene at the University of Bridgeport, the Fones School of Dental Hygiene. I am the Immediate Past President of the Connecticut Dental Hygienist's Association.

This year 2013 represents the 100th year of dental hygiene in Connecticut. Dental hygiene is one of the few truly preventative professions, providing services to help people take care of their oral health and prevent dental disease. Dr. Fones in 1913 demonstrated this preventative care by incorporating dental hygienists into the Bridgeport school system, resulting in a reduction of dental carries by 33%! Our State is rich in history for dental hygiene and has demonstrated the importance of this profession.

Subject: **HB 6589** and **SB993** Testimony

100 years later, we all want to advance the dental team and profession, and address access to care for the dentally underinsured and underserved in Connecticut. This can be accomplished by using the language approved in last years' HB 5541 bill, by amending SB 993, or amending HB 6589. As you deliberate I hope you will consider these revisions and include the ADHP- a midlevel dental hygiene provider, to bring forth as a bill, again this year.

Please, amend the above dental bill(s) (either S.B. 993 or H.B. 6589) to include both EFDA and the ADHP together; by using the PRI approved - language from the 2012 bill (HB 5541) as substitute language. This language is being submitted by one of our colleagues, (and is very clearly stated in last year's bill).

During testimony this week, for S.B. 993 and H.B. 6589 some of our colleagues drew the following comparisons which clarifies the position of the ADHP. If we compare medicine to dentistry, it might look like this:

**CNA** (Certified Nurse Assistant) **compares to CDA** (Certified Dental Assistant)  
**LPN** (Licensed Practical Nurse) **compares to EFDA** (Expanded Function Dental Assistant / *without the license& oversight*)  
**RN** (Registered (Licensed) Nurse) **compares to RDH** (Registered (Licensed) Dental Hygienist)  
**APRN** (Advanced Practice Registered (Licensed) Nurse) **compares to ADHP** (Advanced (Licensed) Dental Hygiene Practitioner)

**MD (Licensed) compares to DDS or DMD (Licensed)**

The addition of the ADHP to the public health workforce will close the gap in care by inserting the missing provider, for midlevel care in the dental workforce. The ADHP ladders dental hygiene, adds jobs that augment one another, and has the potential to create more collaboration among medical and dental providers.

Currently, in public health settings, mid-level providers work with collaborative agreements. Patients with identified needed care would be referred to our dental partners (dentists, oral surgeons, endodontists, periodontists, pedodontists, orthodontist, etc ) and this will not change with the addition of an ADHP. Collaborative practice is already established in a public health settings' policy. My association (CDHA) has already provided the Public Health Committee background information on the ADHP provider model and can address any matter that needs further clarification.

Thank you for your consideration of this proposal, let's work together to address the dental needs our Connecticut residents.

Respectfully,

A handwritten signature in cursive script that reads "Laurel Risom RDH, MPH".

Laurel Risom RDH, MPH  
CDHA Immediate Past President  
Clinical Assistant Professor  
University of Bridgeport  
Bridgeport, CT.  
Irisom @bridgeport.edu